

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	D.B.	102812-00	
O.I.P.E. CLASSIFIER	PD	721	
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	D.B.	7001V 7001	9/28/00 11/2/00

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## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      0 ..... Objected

Claim	Date
Final	
Original	
1	✓
2	✓
3	✓
4	✓
5	0
6	✓
7	0 0
8	0 0
9	✓
10	✓
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12	✓
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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